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ROBERT FROH		( JUN :	1 2 2006	Cei	rtificate of M	ailme or Trans	smission.	
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10/688,190	10/688,190 10/16/2003		Scott K. Anderson		3058		7114	
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nemprovisional	YES	\$700		\$300	\$1000		08/24/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS	]			
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Fax:	571-273-2885	Pages: 3, including this Cover		
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## Comments:

The following pages relate to Application No. 10/688,190 and include:

PTOL-85 Fee Transmittal related to Notice of Allowance, 1 sheet, and

PTO-2038 Credit Card Authorization for \$1000 to be applied for

Issue and Publication Fees, 1 sheet.

Regards,

/Robert A. Frohwerk 51707/

Robert A. Frohwerk, Agent #51707